

CIVIL AIR PATROL

The United States Air Force Auxiliary

Business Membership Application

NAME & ADDRESS OF CORPORATION	NAME OF CORPORATION PRESIDENT OR CEO	
UNLESS OTHERWISE NOTED, MEMBERSHIP CERTIFICATE WILL BE MADE TO THIS NAME.	PLEASE STIPULATE PREFERRED TITLE	
	PHONE: ()	OPTIONAL
NAME AND MAILING ADDRESS/POINT OF CONTACT FOR COR	PORATE FOUNDATION	
DUONE: /		
PHONE: ()PROMOTION		
 Does your firm object to CAP using your company's program? To encourage CAP members to support corporations company's name will be printed in the CAP News ur want your business membership published, check h 	s/companies who contribute to	c Civil Air Patrol, your membership. If you DO NOT
ANUMBER OF EMPLOY BNUMBER OF CORPOR CNUMBER OF EMPLOY	RATE AIRCRAFT OWNED	VIL AIR PATROL
GIFT DESIGNATIONS		
In consideration of the humanitarian services performed by hereby applies for business membership in one of the follow us how to apply the gift on the right.		
MEMBERSHIP SUGGESTIONS:	APPLY CONTRIBUTION TO:	
a\$5,000.00 Full Business Membership b\$2,500.00 Associate Membership c\$1,000.00 Friend d\$50 - \$999 \$ Contributor Amount	Unrestricted: General Fund	Restricted: Emergency Services Cadet Programs Aerospace Education Other
PAYMENT		

Please make checks payable to your local CAP unit.